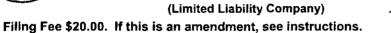


## State of California **Secretary of State**

## STATEMENT OF INFORMATION

(Limited Liability Company)



IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME **REGALIAN LLC** c/o WONG & JOPANDA, AAC 450 N. BRAND BLVD., SUITE 600 GLENDALE, CA 91203

FILED Secretary of State State of California

FEB 2 7 2014

			This Space For	Filing Use Only	
File Number and State or Place of Organization					
		. STATE OR PLACE OF ORGANIZ CALIFORNIA	TATE OR PLACE OF ORGANIZATION (If formed cutside of California)		
No Change Statement					
	ges to the information contained in the la formation has been previously filed, this			mia Secretary of	
If there has been no cha State, check the box and	ange in any of the information contained in proceed to Item 15.	n the last Statement of Inform	nation filed with the C	alifornia Secretary of	
Complete Addresses for the Following (Do not abbreviate the name of the city. Items 5 and 7 cannot be P.O. Boxes.)					
5. STREET ADDRESS OF PRINCIPAL OFFICE		CITY	STATE	ZIP CODE	
450 N. BRAND BLVD., SUITE 600		GLENDALE		CA 91203	
6. MAILING ADDRESS OF LLC, IF DIFFERENT THAN ITEM 5		CITY .	STATE	ZIP CODE	
P. O. BOX 889		MONTEREY PARK	Κ	CA 91755	
7. STREET ADDRESS OF CALIFORN		CITY	STATE	ZIP CODE	
450 N. BRAND BLVD., SUITE	£ 600	GLENDALE	CA	91203	
Name and Complete Address of the Chief Executive Officer, If Any					
8. NAME JUSTIN L. M. LEONG	c/o 450 N. BRAND BLVD., SUITE 6	500 GLENDALE	STATE	ZIP CODE CA91203	
Name and Complete Address of Any Manager or Managers, or if None Have Been Appointed or Elected, Provide the Name and Address of Each Member (Attach additional pages, if necessary.)					
9. NAME JUSTIN L. M. LEONG	ADDRESS c/o 450 N. BRAND BLVD., SUITE 6	CITY 500 GLENDALE	STATE	ZIP CODE CA 91203	
10. NAME	ADDRESS	CITY	STATE .	ZIP CODE	
11. NAME	ADDRESS	CITY	STATE	ZIP CODE	
Agent for Service of Process If the agent is an Individual, the agent must reside in California and Item 13 must be completed with a California address, a P.O. Box is not acceptable. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.					
12. NAME OF AGENT FOR SERVICE OF BRENDA K, WAH					
13. STREET ADDRESS OF AGENT FO 450 N. BRAND BLVD., SUITE	AD CEDVICE OF DROCECO IN CALIFORNIA 15 AM	INDIVIDUAL CITY	STATE	ZIP CODE	
		GLENDALE	<u>CA</u>	91203	
Type of Business		GLENDALE	CA	91203	
14. DESCRIBE THE TYPE OF BUSINE		GLENDALE	<u>CA</u>	91203	
	E 600,	GLENDALE	CA	91203	
14. DESCRIBE THE TYPE OF BUSINE LEASING PROPERTIES	E 600,		CA	91203	
14. DESCRIBE THE TYPE OF BUSINE LEASING PROPERTIES  15. THE INFORMATION CONTAINED FOR THE	E 600,  ESS OF THE LIMITED LIABILITY COMPANY  HEREIN, INCLUDING ANY ATTACHMENTS, IS TRU  I L. M. LEONG	UE AND CORRECT.  MANAGER	CA	91203	
14. DESCRIBE THE TYPE OF BUSINE LEASING PROPERTIES  15. THE INFORMATION CONTAINED FOR THE LEASING PROPERTIES  24 PGB 2014 JUSTIN	ESS OF THE LIMITED LIABILITY COMPANY HEREIN, INCLUDING ANY ATTACHMENTS, IS TRU	UE AND CORRECT.  MANAGER	- Core	1	